

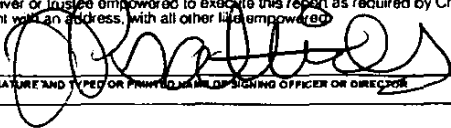


FILED
Mar 29, 2007 8:00 am
Secretary of State

03-15-2007 90035 004 ***150.00

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P05000077782		
1. Entity Name JASON PSALTIDES, PA		
Principal Place of Business 14101 NW 4TH STREET SUNRISE, FL 33325		Mailing Address 14101 NW 4TH STREET SUNRISE, FL 33325
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent PSALTIDES, JASON K 14101 NW 4TH STREET SUNRISE, FL 33325		66007132  01082007 No Chg-P CR2E034 (11/05)
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.		4. FEI Number 20-3206357 Applied For Not Applicable
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when re-appointing)</small>		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDST PSALTIDES, JASON K 14101 NW 4TH STREET SUNRISE, FL 33325	DO NOT WRITE IN THIS SPACE
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other individuals empowered.		
SIGNATURE: 		3/26/2007 845 9500 Date Daytime Phone #